



**SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT  
BY A CANDIDATE'S COMMITTEE  
(\$1,000 CONTRIBUTIONS OR MORE)**

State Form 48492 (R4 / 11-05)  
Indiana Election Commission (IC 3-9-5-20.1; 3-9-5-22)

(CFA-11)

**INSTRUCTIONS:** Only candidates receiving a "large contribution" are required to file this report. Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-11  
REPORT

1

**COMMITTEE INFORMATION**

1. Full Name of Candidate (include any nickname) <input type="checkbox"/> Check if this is a new name Christine Pauley		2. Committee Telephone Number ( 317 ) 446-4649	
3. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address 87 11th St. NW			
4. City Carmel	State IN	ZIP Code 46032-1368	5. Party Affiliation or if Independent Candidate Republican
6. Office Sought (include district number, if any. Not required for exploratory committee.) Office of Clerk Treasurer, City of Carmel, Hamilton County, Indiana			7. County of Residence Hamilton
8. Reporting Period: From: 4/11/15 Through: 5/5/15			

For classification, enter INDV for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; NONE for all entries which are not one of the above categories.

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED RECEIVED BY
Classification INDV	1.  Rob Bush 701 Congressional Blvd. Suite 360 Carmel, IN 46032  Contributor's Occupation (if applicable) Business Owner	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$1,000.00	4/20/2015  Treasurer
Classification	2.     Contributor's Occupation (if applicable)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)		
Classification	3.     Contributor's Occupation (if applicable)	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe)  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)		

**CERTIFICATION**

TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS

Title Treasurer	Date (MM-DD-YY) 4-21-2015
	Date (MM-DD-YY)

Not to be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A  
felony. (IC 3-14-1-13) A person who fails to file a complete or accurate  
report is a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil

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